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PAGE 10F4

**MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/603,216  
FILING DATE 6/26/00  
APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
151		%					201		%				
152							202						
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194							244						
195							245						
196							246						
197							247						
198							248						
199							249						
200		%					250		%				
TOTAL IND.	0						TOTAL IND.	1					
TOTAL DEP.	50						TOTAL DEP.	51					
TOTAL CLAIMS	50						TOTAL CLAIMS	52					

PTO-1380 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-375)							APPLICANT(S)				
CLAIMS											
?	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		?	?		?	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
251		/					301		/		
252							302				
253							303				
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297							347				
298							348				
299							349				
300		/					350		/		
TOTAL IND.	0						TOTAL IND.	1			
TOTAL DEP.	50						TOTAL DEP.	51			
TOTAL CLAIMS	50						TOTAL CLAIMS	52			

PTO-1380 (3-78)

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MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

09/603,216

FILING DATE

6/26/00

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
351							401						
352							402						
353							403						
354							404						
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399							449						
400							450						
TOTAL IND.	0						TOTAL IND.	1					
TOTAL DEP.	50						TOTAL DEP.	49					
TOTAL CLAIMS	50						TOTAL CLAIMS	50					

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MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

09/603,216

FILING DATE

6/26/00

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT							
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
451		X						501		X		
452								502				
453								503				
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500		X										
TOTAL IND.	0							TOTAL IND.	0			
TOTAL DEP.	50							TOTAL DEP.	5			
TOTAL CLAIMS	50							TOTAL CLAIMS	5			

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CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
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43							93						
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48							98						
49							99						
50							100						
TOTAL IND.	1						TOTAL IND.	0					
TOTAL DEP.	49						TOTAL DEP.	50					
TOTAL CLAIMS	50						TOTAL CLAIMS	50					

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			IND.		DEP.			IND.		DEP.		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.		IND.	DEP.			
101							151										
102							152										
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107	1						157										
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146							196										
147							197										
148							198										
149							199										
150							200										
TOTAL IND.	1						TOTAL IND.	8									
TOTAL DEP.	49						TOTAL DEP.	50									
TOTAL CLAIMS	50						TOTAL CLAIMS	50									

PTO-1360 (3-78)

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
201							251						
202							252						
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245							295						
246							296						
247							297						
248							298						
249							299						
250							300						
TOTAL IND.	1						TOTAL IND.	0					
TOTAL DEP.	49						TOTAL DEP.	50					
TOTAL CLAIMS	50						TOTAL CLAIMS	50					

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
301							351						
302							352						
303							353						
304							354						
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342		3					392						
343							393						
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345							395						
346							396						
347							397						
348							398						
349							399						
350							400						
TOTAL IND.	1						TOTAL IND.	0					
TOTAL DEP.	51						TOTAL DEP.	50					
TOTAL CLAIMS	52						TOTAL CLAIMS	50					

PTO-1360 (3-78)

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-876)

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
401						
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TOTAL IND.	1					
TOTAL DEP.	49					
TOTAL CLAIMS	50					

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
451						
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500						
TOTAL IND.	0					
TOTAL DEP.	50					
TOTAL CLAIMS	50					

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\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

**SERIAL NO.**

FILING DATE

**APPLICANT(S)**

## CLAIMS

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
501						
502						
503						
504						
505						
TOTAL IND.	0					
TOTAL DEP.	5					
TOTAL CLAIMS	5					

PTO-1360 (3-78)

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2							52						
3							53						
4							54						
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44		/					94						
45		/					95						
46		/					96						
47		/					97						
48		/					98						
49		/					99						
50		/					100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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**MULTIPLE DEPENDENT CLAIM  
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APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
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7	1						57						
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50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
204							51						
2							52						
3							53						
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13	1						63						
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234	3						84						
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43							93						
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47							97						
48							98						
49							99						
50							300						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
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APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
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44							94						
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46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
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43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51						
2							52						
3							53						
4							54						
5							55						
6							56						
7							57						
8							58						
9							59						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							77						
28							78						
29							79						
30							80						
31							81						
32							82						
33							83						
34							84						
35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.							TOTAL IND.						
TOTAL DEP.							TOTAL DEP.						
TOTAL CLAIMS							TOTAL CLAIMS						

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